



Health Care Staff Support and Supervision Policy

Introduction

This policy has been produced to clarify the goals, principles and good practice associated with the supervision of our Healthcare staff. It details the key functions performed within supervision, shared obligations and the framework within which supervision takes place. The SCIL is committed to providing our Healthcare staff with the supervision and support they require to carry out the responsibilities of their job. Supervision works best when there is clear understanding between those involved about their respective roles, responsibilities and the purpose and desired outcomes.

Methods of Supervision

- One to One supervision with Supervisor
- Group supervision
- Specialist supervision (where specific support and or expertise is required)

Frequency of Supervision

- One to one supervision will take place every 6 months
- Group supervision will take place every 3 months
- Specialist supervision will take place in either group or one to one situations as needs require.

Aims of Healthcare Supervision

The main aims of supervision (one to one, group or specialist) are:

- To ensure that Supervision and support is delivered in a consistent way across all our Healthcare services
- To clarify the responsibilities and expectations of both parties participating in support and supervision
- Ensure service is delivered in accordance with the care plan
- Ensure that service objectives are being met
- Enable work to be planned and progress monitored
- Promote good practice and reflective learning
- Reflect the values, vision and ethos of SCIL
- Provide support to Healthcare staff in carrying out their work
- Ensure that learning and training & development needs are planned for and provided

- Allow for constructive two way feedback
- Debriefing on significant events in the organisation
- Identifying personal support needs
- Annual Leave & Sickness entitlements
- Assist all staff to use their combined knowledge and experience

SCIL recognises that, in addition to individual supervision sessions, there are other ways in which staff discuss and seek advice on their work and new ideas and methods of working including group supervision. These are valuable and helpful ways in which staff can broaden their knowledge and expertise.

Obligations in the Supervision Relationship

The Supervisor and Supervisee will both:

- Treat each other with respect, listening carefully to allow issues to be explored in depth and in a style that is fair and respectful to both people
 - Be realistic, open and honest with each other
- Allow the amount of time agree/necessary for full discussion
- Plan in advance to give supervision a high priority, with both parties preparing for the session in advance.
 - It also recognises people are individuals, the unique experience that they bring to their work and the impact their work has on them, particularly in respect of age, race, religion, gender, disability and sexual orientation.

Key functions of a good supervisor

There are 3 main features that a supervisor must include for good supervision:

- Supportive – assisting workers to feel supported in their day-to-day work. This may include how they deal with feelings associated with their care giving role.
- Learning and Developmental- helping to improve personal skills and knowledge.

Encouragement of active learning and reflection of day to day practice

- Practice – Overseeing all aspects of work and monitoring of quality of services delivery and implementation of the SCIL standards.

Supervision Framework

It is a requirement that the Supervisor and Healthcare worker agree certain boundaries and expectations. It is important to regularly review and monitor these to check that they are working for both parties. This should usually be done as the first task of supervision by agreeing an agenda to clarify some of the following

- When, where and for how long will supervision take place?

- How often will supervision take place? (every 3 months for one to one)

Some Healthcare staff may need more support at various times and for various reasons i.e. new staff member or challenging care requirements of Service User

- Review of previous supervision records
- What preparations are necessary by each person?
- What are the agreed boundaries of confidentiality? Is there information that the Supervisor may have to share with the CEO?

Approved by:

Maria Mulligan, CEO, SCIL

Date: April 2021